Washington Health Benefit Exchange
Navigator Program Technical Advisory Committee

August 16, 2012
2-3:30pm

Health Benefit Exchange
Teleconference Only
1-888-850-4523; Participant Passcode: 792767

ID	Topic	Facilitator	Time
1.	Welcome and introductions	Michael Marchand	2:00
2.	Exchange updates and meeting notes/action items review	Michael Marchand	2:05
3.	Discuss network of potential Navigator organizations	All TAC Members	2:35
4.	Next steps and adjourn	Michael Marchand	3:25

The Navigator Program TAC will consider all matters on the agenda plus any items that may normally come before them.

Direct e-mail to: HCAHLTBENEX@hca.wa.gov

Materials posted at: http://www.hca.wa.gov/hcr/exchange/ntac.html

ID	Notes	Action Items
1.	Michael Marchand conducted a roll call of members. TAC members present included Rhonda Hauff, Vicki Lowe, Lara Welker, Sofia Aragon, John Hamje, Pam Cowley, and Devon Love. Michelle Sarju was absent.	
2.	Michael noted that the purpose of the Navigator TAC is to provide expertise, experience and professional perspectives related to developing the Exchange Navigator program. Items for discussion are passed down from the Board and requested to be considered by the TAC. The TAC will deliberate and provide comments to the Board Policy and/or Operations Committees. All TACs are ad hoc committees that are created and disbanded as issues come up and are resolved. Michael noted that the Board discussed the Navigator Program at the last Board meeting on August 15. He noted that the conversation focused on consistent, objective and measurable Navigator criteria. He noted that the program would go through phases including 1.) application and selection; 2.) training and certification; and 3.) performance evaluation and payment. Michael noted that several TAC members had requested to have a conversation about Navigator program principles. The California Guiding Principles document was summarized. Navigator TAC members discussed the following principles: • Sofia commented that it is important to not reinvent the wheel. • Rhonda added that in addition to the guiding principles outlined in the California document, she would suggest adding health literacy as an important competency for Navigators. • Devon agreed that the California document would be a good place to start and that health literacy should be included. • Rhonda noted that it would be important that guiding principles cover both Navigator Organizations and Navigator Representatives.	➢ Exchange staff will draft the objectives document and send to the TAC to discuss at their next meeting.
3.	To begin the conversation about the potential network of Navigator Organizations, Michael asked TAC members to respond to whether they think collaboration could be a suitable metric on the application or as a performance measure. TAC members provided the following feedback: • Lara noted that 100 community partners would be preferable to 20 partners. • Michael commented that it would be important to not measure only organization size but effort being made to accentuate collaboration. • Lara noted that collaboration is a strategy rather than an end result.	➢ Staff will include the ACA-defined duties in the goals and principles draft.

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	• Rhonda commented that many organizations network to do outreach. She noted that success should be measured by connecting clients from one organization to another. For Navigators, success should be measured by connecting clients to services akin to the Exchange. • Vicki noted that tribes already connect clients to services. • Sofia noted that a Navigator should connect clients to a network that helps them meet their needs. • Michael asked whether this ability could be measured though the application or through performance metrics. • Lara commented that it would be better to focus on the numeric enrollment results. • John noted that in SHIBA, sponsors are expected to have active partnerships or referral networks. • Pam noted that in California the Navigators would be evaluated at three levels including: 1.) by their community, 2.) by those whom they collaborate with, and 3.) through the training and compliance. • Michael asked about measuring outreach events with partners. • Rhonda noted that outreach at a local level matters and is important. Having partners to do this work is a statement of organizational credibility. • Lara noted that an approach might be to ask organizations what they are able to do. Collaboration might be part of that. • Michael noted that collaboration might be part of an organization's workplan. • Vicki noted that there is a difference between training and certification. She asked how the program would push organizations to get to a certain level of competency. • Lara commented that the program should focus on what Navigator representatives need to know. • Sofia noted that the program could ask organizations to describe the current population served and how the organizations meet the needs of that population. • Lara asked who will define success. • Michael responded that the Board will weigh in on the definition of success but that the Navigator TAC would be crucial to the process of brainstorming the definition. • Rhonda asked how much information Navigators would have access to. • Michael responded that the IT system is being built and those decisions are being made. • Rhonda noted that Navigators should have access to enough information so that they can help a consumer choose and apply for a health plan in one setting. She also noted that it is important that Navigators be able to connect the consumer to all types of social services which they may be eligible for.	

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	• Michael commented that the Exchange will not interface with many of the other social service platforms in its first iteration. • Sofia asked whether Navigator duties and goals are outlined in the ACA. • Michael responded that the ACA provides a concrete baseline definition of Navigators.	
4.	Michael noted upcoming meetings of the Advisory Committee, Consumer Workgroup and Exchange Board available at http://www.hca.wa.gov/hcr/exchange/meetings.html.	